

## **NOTICE OF ACTION**

*(CRS Contractor Letterhead)*

If you have trouble reading this notice because the letters are too small or the words are hard to read, please call our office at (XXX) XXX-XXXX or 1(800) XXX-XXXX and someone will help you. This letter is available in other languages and formats if you need it.

Si usted no entienda esta carta o usted tiene alguna pregunta por favor de llamar al (XXX) XXX-XXXX or 1(800) XXX-XXXX. Esta carta esta disponible en otras idiomas y formato si es que lo nesecita.

TO:

DATE:

FROM:

*(You or your doctor - as appropriate) have asked that (Health Plan Name) pay for (describe services requested and the reason for the services in easily understood language.)*

### **Our Decision**

*(Insert action being taken here and date effective if terminating or reducing a current service.)*

### **The Reasons For Our Decision**

#### Facts About Your Condition or Situation that Support Our Decision

*(Insert the reason for the action, which must be complete and in commonly understood language. The explanation must be both member and fact specific, describing the member's condition and the reasons supporting the CRS Contractor's decision. If the reason for the denial is a lack of information, the missing information must be identified so the member has an opportunity to provide it.)*

#### Legal Basis for Our Decision

We based our decision on *(insert correct legal citation here)*.

Copies of Legal Citations can be found at the local library or at <http://www.azahcccs.gov/Regulations/LawsRegulations/>.

## **Your Rights If You Disagree With This Decision**

If you are not happy with this decision, you can ask us to look at the decision again. This is called an appeal. You can appeal by telling us over the phone or in writing. You must call us at *(insert grievance phone number)* or write us by ***(insert date, no later than 60 calendar days after the date of this Notice)***.

If you are writing your appeal, please send it to *(insert CRS Contractor mailing address here)*.

You can also see your medical records and get other information about your appeal. Before we make our decision, you can give us any information that you think will be helpful. You can ask us to set up a meeting so that you can give us the information in person, or you can give it to us in writing.

After we review your appeal, we will send you our decision in writing within 30 days of the date we received your appeal request.

## **If You Need A Faster Decision On Your Appeal**

If you or your doctor believes that your health or ability to function will be harmed unless a decision is made in the next three days, you or your doctor can ask us for a fast review by calling us and asking for an expedited appeal. If we agree, we will decide your appeal in 3 working days. If we do not agree a fast review is needed, we will write you within 2 days, and we will also try to call you. We will decide your appeal within 30 days.

## **Getting Help If You Want To Appeal This Decision**

You can have someone help you with the appeal. Your doctor or other health care provider can appeal for you if you write to us giving them permission.

If you would like legal help with this decision, please contact the legal aid program in your county listed on the attached sheet.

## **Continuing Services While We Make A Decision on Your Appeal**

If the services you write about in your appeal are already being given to you, but are going to be cut back or stopped, you can ask that the services continue while we make a decision. If you want those services to continue, you must say so when you appeal. Your services will only be continued if you appeal by ***(insert date, the later of 10 calendar days from the date of the Notice OR the intended date of the action)***. If you do not win your appeal, you may be responsible for paying for these services provided during the appeal.

## **Taking More Than 30 Days to Decide Your Appeal**

For all appeals, up to 14 more days may be taken to make a decision on your case. This is called an extension. If we want an extension, we will write you and tell you why it is needed and how it is helpful to you. If you want an extension, you can ask for it by writing or calling us. If an extension is given, a decision in your appeal will be made in 44 days, rather than 30 days.

If you have any questions about filing an appeal or if you need help, you can call us at  
*(insert CRS Contractor phone number here).*

Sincerely,

*(Insert name of Decision Maker)*

**Legal Services Programs that May Be Able to Help You With This Decision**

<b>APACHE COUNTY</b> <u>White Mountain Legal Aid</u> a division of Southern Arizona Legal Aid 5658 Highway 260, Ste. 15, Lakeside, AZ 85929 Phone: (928) 537-8383/1(800) 658-7958	<b>COCHISE COUNTY</b> <u>Southern Arizona Legal Aid</u> 2 Copper Queen Plaza, Upstairs P.O. Box AL Bisbee, AZ 85603 Phone: (520) 432-1639/1(800) 231-7106	<b>COCONINO COUNTY</b> <u>DNA People's Legal Services</u> 201 E. Birch St. Flagstaff, AZ 86001 Phone: (928) 774-0653/1(800) 789-5781
<b>GILA COUNTY</b> <u>White Mountain Legal Aid</u> a division of Southern Arizona Legal Aid 5658 Highway 260, Ste. 15 Lakeside, AZ 85929 Phone: (928) 537-8383/1(800) 658-7958	<b>GRAHAM COUNTY/GREENLEE COUNTY</b> <u>Southern Arizona Legal Aid</u> 2 Copper Queen Plaza, Upstairs P.O. Box AL Bisbee, AZ 85603 Phone: (520) 432-1639/1(800) 231-7106	<b>LA PAZ COUNTY</b> <u>Community Legal Services</u> 201 S. 1st Ave. Yuma, AZ 85364-2250 Phone: (928) 782-7511/1(800) 424-7962
<b>MARICOPA COUNTY</b> <u>Community Legal Services</u> P.O. Box 21538 Phoenix, AZ 85036-1538 Phone: (602) 258-3434/1(800) 852-9075  <u>Community Legal Services</u> East Side Office 20 W. First St., Ste. 101 Mesa, AZ 85201 Phone: (480) 833-1442/1(800) 896-3631	<b>MOHAVE COUNTY</b> <u>Community Legal Services</u> 1720 Beverly, Ste. A Kingman, AZ 86409 Phone: (928) 681-1177/1(800) 255-9031	<b>NAVAJO NATION</b> <u>DNA – Chinle Agency Office</u> P.O. Box 767 Chinle, AZ 86503 Phone: (928) 674-5242/1(800) 789-7598  <u>DNA – Fort Defiance Agency Office</u> P.O. Box 306 Window Rock, AZ 86515 Phone: (928) 871-4151/1(800) 789-7287
<b>PINAL COUNTY</b> <u>Southern Arizona Legal Aid</u> 766 North Park Ave. Casa Grande, AZ 85222 Phone: (520) 316-8076/1(877) 718-8086	<b>NAVAJO COUNTY</b> <u>White Mountain Legal Aid</u> a division of Southern Arizona Legal Aid 5658 Highway 260, Ste. 15 Lakeside, AZ 85929 Phone: (928) 537-8383/1(800) 658-7958	<u>DNA – Hopi Legal Services</u> P.O. Box 558 Keams Canyon, AZ 86034 Phone: (928) 738-2251/1(800) 789-9586  <u>DNA – Tuba City Agency Office</u> P.O. Box 765 Tuba City, AZ 86045 Phone: (928) 283-5265/1(800) 789-8919 Fax: (928) 283-5460
<b>PIMA COUNTY</b> <u>Southern Arizona Legal Aid (SALA)</u> 64 E. Broadway Blvd. Tucson, AZ 85701-1720 Phone: (520) 623-9465/1(800) 640-9465  <u>Tohono O'odham Legal Services</u> a division of Southern Arizona Legal Aid P.O. Box 597 Sells, AZ 85634-0597 Phone: (520) 383-2420/1(800) 398-0772	<u>Native American Disability Law Center</u> Farmington Office 3535 E. 30th St., Ste. 201 Farmington, NM 87402 Phone: (505) 566-5880/1(800) 862-7271  Gallup Office 207 S. Second St. Gallup, NM 87301 Phone: (505) 863-7455/1(877) 283-3208	<u>Native American Disability Law Center</u> Farmington Office 3535 E. 30th St., Ste. 201 Farmington, NM 87410 Phone: (505) 566-5880/1(800) 862-7271  Gallup Office 207 S. Second St. Gallup, NM 87301 Phone: (505) 863-7455/1(877) 283-3208
<b>SANTA CRUZ COUNTY</b> <u>Southern Arizona Legal Aid</u> 1071 N. Grand Ave., Ste. 110 Nogales, AZ 85621 Phone: (520) 287-9441	<b>WHITE MOUNTAIN APACHE TRIBE</b> <u>White Mountain Apache Legal Aid</u> a division of Southern Arizona Legal Aid 116 East Oak St. or P.O. Box 1030 Whiteriver, AZ 85941 Phone: (928) 338-4845/1(866) 312-2291	
<b>YUMA COUNTY</b> <u>Community Legal Services</u> 201 S. 1st Ave. Yuma, AZ 85364-2250 Phone: (928) 782-7511/1(800) 424-7962	<b>YAVAPAI COUNTY</b> <u>Community Legal Services</u> 401 N. Mt. Vernon Prescott, AZ 86301 Phone: (928) 445-9240/1(800) 233-5114	<b>STATEWIDE</b> <u>Arizona Center for Disability Law</u> 3839 N 3rd St., Ste. 209 Phoenix, AZ 85012 Phone: (602) 274-6287/1(800) 927-2260

General Legal Information about Your Rights & Website for Each Legal Aid Office:  
2/27/2007

[www.azlawhelp.org](http://www.azlawhelp.org)